

0-3 Secondary Prevention Initiative

By

The Michigan Department of Community Health
The Michigan Department of Education
The Michigan Family Independence Agency

0-3 Secondary Prevention is a state-sponsored, collaborative, community-based initiative aimed at developing an integrated system of services for Michigan families with children ages zero to three who are at risk of child abuse and neglect. The 0-3 Secondary Prevention Initiative is supported by pooled funds from the Departments of Community Health, Education, and the Family Independence Agency. The Michigan Children's Trust Fund serves as the administering agency over these funds. Between Fiscal Year 1998 and Fiscal Year 2001, the state has increased the number of 0-3 Secondary Prevention grants from 24 to 64 and the funding has grown from an initial appropriation of \$2 million to \$7.75 million.

The enabling legislation for the initiative in P.A. 294 of 2000 (Family Independence Agency), P.A. 297 of 2000 (Education), and Public Act 296 of 2000 (Community Health) states that the 0-3 funds shall be used for grants to support community-based, collaborative secondary prevention services designed to:

- Foster positive parenting skills
- Improve parent/child interaction
- Promote access to needed community services
- Increase local capacity to serve families at risk
- Improve school readiness
- Support healthy family environments that discourage alcohol, tobacco, and other drug use

Two thirds of all reported victims of child abuse and neglect in Michigan are young children – age 6 and younger.

--Compiled by the Children's Trust Fund. Data obtained from Child Protective Service records of the Michigan Family Independence Agency

All 0-3 funded programs maintain the following requirements:

- Only target and serve families with children age 0-3 who have identified risk factors
- Only target and serve families that do not have an active Protective Service Case
- Operate the program based on a community plan for prevention
- Document a local match of at least 25%
- Conduct an evaluation of the services

Since its creation, the 0-3 Secondary Prevention fund has been a catalyst throughout Michigan for creative and collaborative approaches for serving families with young children. Excellent examples of collaboration with 0-3 funded projects have emerged in communities that have received grants through the recent \$45 Million appropriation for the All Students Achieve Program – Parent Involvement and Education Grants (ASAP-PIE) through the State School Aid Act. **In most communities the 0-3 funds are not sufficient to serve all the target families.** As a result, many communities are using part of the ASAP-PIE grants to strengthen/expand the initiatives funded by 0-3 dollars. In these cases, true collaboration between local grantees and service providers has expanded the local capacity to serve the 0-3 target families.

“One of our home visitors decided to make a quick stop to a new mother and grandmother on her way to another home visit. When she arrived the grandmother said that she was so frustrated with the fussy baby and had just been thinking of shaking the crying infant. She said she knew this was wrong but was at the end of her rope. She was so grateful for the home visitor’s unexpected and timely visit. Emergency intervention was put in place and an in-depth planning session took place the next day.”

--Calhoun Early On

Statewide Results to Date*

- Over 5,000 families have been impacted by the 0-3 Secondary Prevention Funds since its inception.
- Families who complete services are not as likely to have involvement with Children's Protective Services. Of a sample of 220 participants who were no longer participating in 0-3 Secondary Prevention services, 25% of those who dropped out were referred to Children's Protective Services as opposed to 14% of those who completed services.
- Over half (55%) of the programs are already meeting or exceeding locally determined outcomes.
- Services are flexible, e.g., over half (52%) establish the frequency of meetings according to family needs, two thirds (66%) are "flexible" or "very flexible" in setting hours of service delivery.
- Communities are blending the newly funded services with already existing services in the community to maximize resources.
- In less than two years, sites have more than doubled the number of families assessed for risk.
- Sites are identifying specialized high risk populations and improving or expanding their ability to serve them with 0-3 Secondary Prevention funds, e.g., teen parents, families in conflict, infants with specialized needs, etc.

"There are clear benefits of the (home visiting) program for those families most in need but also that the savings in government spending seen for the first four years after birth of the child continue to accumulate over the succeeding decade."
-- Charles Henderson, Senior Research Associate, talking about the long term benefits of home visiting programs.

* Information in this section was collected and analyzed by the Michigan Public Health Institute

A Snapshot of Results from Individual Programs

- In a Control Group study of 322 families enrolled in the Oakland County Healthy Start Program from October, 1994 to April, 1999 the following outcomes were shown:
 - For the families utilizing the Healthy Start Program, 1.5% had substantiated reports of child abuse and neglect versus 14% for the control group.
 - 95% of the Healthy Start group was fully immunized versus 85% of the control group.
 - The Healthy Start group scored significantly higher on child development outcomes versus the control group.

The use of the emergency room was low among participants in Healthy Start (6.2%). As emergency room use declined, use of physician visits related to illness increased, indicating that mothers began to use more cost-efficient office medical care instead of crisis oriented emergency medical care. These trends occurred in contrast to a 21% rate of emergency room use among the short term intervention group, and a 42% rate of emergency room use among the control group.

-- Cynthia Schellenbach, Ph.D. discussing the outcomes of five year report of the Healthy Families Oakland Program

Other Examples of Individual Program Results (*Representative of the Majority of Programs*)

- "96% of enrolled families did not have a substantiated incident of child abuse and neglect."
- "99% of the children met developmental goals."
- "96% of children were fully immunized."
- "98% of participants expressed satisfaction with the program."
- "100% of children experiencing developmental delay were referred to appropriate services."
- "100% of families have shown growth in parenting skills using a pre/post survey."

Services Provided

- 95% of the 64 funded programs provide home visitor services.
 - Over 50% of the 64 funded programs provide parenting classes and/or support groups.
 - All the programs (100%) provide parenting information to families.
 - All the programs (100%) provide or connect families with other resources in the community such as parenting classes and support groups, health services, nutrition, mental health services, basic needs items, housing, etc.
- All families (100%) served by the 0-3 Secondary Prevention Funds are screened for risk factors related to child abuse and neglect.
 - The majority of programs conduct an initial screen of families at the hospital immediately after birth. Those families determined at-risk are screened more intensively for needs and risk factors.
 - The majority of families have multiple risk factors.
 - Screening tools utilized by programs include:
 - Kempe Family Stress Checklist (Over 50% of programs use this tool)
 - Infant/Family Screen
 - Borgess Interaction Assessment
 - Case Acceptance Guide
 - Parent/Child Behavior Checklist
 - All of the programs (100%) conduct developmental screening of the infants involved with the program. Children who are experiencing developmental delay are referred to the appropriate services.

“All parents benefit from information about child development and the importance of providing their children with a nurturing environment. Our goal as caring professionals should be to join them as allies in the systems of care for their children. Our present systems are too often crisis-driven, deficit-oriented, and unwelcoming to parents. Many families, particularly those who have a child with special needs, are often left feeling isolated and unsupported.”

--T. Berry Brazelton, M.D., Researcher, and Author of “Touchpoints”, a nationally renowned series on parenting of young children

We heightened our media efforts and put PSA’s on the television and advertisements throughout the county. We also scheduled speaking engagements with agencies to share information and how to refer to our program. During the last quarter, we received around 100 referrals and we were only able to enroll 60 families.”

-- Grand Traverse MSU Extension

“The program and you have helped me a great deal over the past months. You have assisted me with anything I have needed. These services have helped me become a better parent and adapt to situations as a parent more easily. I have needed you, and you have supported me.”

-- teen mother in Saginaw County

A study conducted by David Olds found that nurse home visitation resulted in less use of welfare, fewer childhood injuries, less child abuse, and fewer arrests among women.

-- (Journal of the American Medical Association, August 1997)